CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY					OTHER TIME		
FOR	NUMBER FILED	NUMBER EX					
ASIC FEE 7 CFR 1.16(a))		1 NOMER EX	TRA RATE	FEE		RATE	17/1/
OTAL CLAIMS 7 CFR 1.18(c))	1/08 minus 20 =	140	x s		OR	×10.	266
DEPENDENT CLAIMS	250	1. 16			OR	001	11-80
37 CFR (1.16(b)) (X.5) minus 3 = 1 (4/4)					OR	×80-	HALL
MULTIPLE DEPENDENT CLAIM PRESENT. (37 CFR 1,16(d))  If the difference in column 1 is less than zero, enter '0' in column 2.					OR	+5	ZIML
	mn ) is less than zero, enter		TOTAL		j oa	TOTAL	OM SI
18101	(Column 1)	***	kimin 3) SMA	LL ENTITY	OR		R THAN ENTITY
			ESENT RATE KTRA	ADDI- TIONAL FEE		RATE	ADDI TIONA FEE
Total (37 CFR 1.16(c))	Minus "	100	/ xs		OR	x s=	
Independent (37 CFR 1.16(b))	88 Minus	28	/ xs		OR	x s =	
FIRST PRESENTATI	ON OF MILL TUPLE DEPENDENT	CLAIM (37 CFR 1.18	(1)		OR	+5 +	1
· · · · · · · · · · · · · · · · · · ·					OR	TOTAL ADD'L FEE	
13/13	(Column 1)	(Calumn 2) (Ca	ADD1 FE				
	CLAIMS REMAINING AFTER PI	HIGHEST NUMBER PRI	ESENT RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (profit sudje) Independent (profit sudje)	09 Minus	108 -	<i>1</i>     <sub>*</sub> ,		OR	×s -	7
Independent (37 CFR 1.16(b))	Ab Minus "	12	/ x.		OR	xs -	1
FIRST PRESENTATI	ON OF MULTIPLE DEPENDENT	CLAIM D7 CFR 1.16					
			TOTAL		OR	TOTAL	
			ADD'L FE		OR	ADD'L FEE	L- <i>f</i>
	Column 1)	(Calumn 2) (Col	umn 3)				
	REMAINING PI	NUMBER PRI	SENT RATE	ADDI- TIONAL FEE		RATE	ADDI- THONAL FEE
Total (37 CFR 1.18(c))	100 Minus "	108 -	78.5	. /	OR	x s=	
Total (prore 1.16(a))	23 Minus "	25	/ x	• /	OR	x 5e	
FIRST PRESENTATION	ON OF MULTIPLE DEPENDENT.	CLAIM (37 CER 16)	c))) + <u>+</u> 5		OR	+ s =	
			TOTAL ADD'L FE		OR	TOTAL ADD'L FEE	

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO for process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time well vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Tradémart Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.